

Dateline DHMH

Maryland Department of Health and Mental Hygiene

October is National Health Literacy Month

As health professionals, most of us take for granted the ability to understand and process complicated health information. For those without these skills, navigating the road to good health can be a confusing and frustrating experience.

October is National Health Literacy Month, a time to increase our awareness of this widespread problem. Healthy People 2010 defines health literacy as “the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate decisions.” That’s a fancy way of saying that in order to be healthy, people must be able to understand information and follow directions.

Having ‘functional health literacy’ means being able to read and comprehend prescription bottles, appointment slips, test instructions and other relevant educational materials. Research shows that poor health status is disproportionately higher among people with low functional health literacy skills. This group is more likely to receive health care services through publicly financed programs, and to incur higher health care costs. One study of Medicaid patients found those reading below third-grade level had average annual health care costs four times those of the overall Medicaid population.

The low-literacy problem affects some populations more than others. Older people, non-whites, and those with low incomes are more likely to have trouble reading and understanding health information. According to the National Adult Literacy Survey, 66 percent of U.S. adults age 60 and over have inadequate or marginal literacy skills. Fifty percent of Hispanic Americans and 40 percent of African Americans have reading problems.

For older adults, decreased ability to read and comprehend health information may be the result of conditions that affect memory and cognitive processes. Poor eyesight and hearing also can prevent some seniors from getting health information, and they may be too proud or too embarrassed to ask for help. The problem is compounded by the fact that adults over age 60 are at higher risk for many chronic health conditions, and therefore have the greatest need for accurate information about managing their conditions.



So how can we reduce the problem? To begin with, if there is a concern that someone may not retain information or advice given by a health care professional, make sure a friend or relative accompanies the individual on the appointment.

When dealing with low-literacy clients, clinic or office staff can tell clients what information will be needed for the next appointment — medicines they are taking, insurance information, and a list of health concerns. To make sure clients understand instructions, ask them to repeat information they’ve been given, as if they were telling a friend. Give clients only the information they need or ask for. Too much information can be confusing and difficult to retain.

On a larger scale, we can help low-literacy clients by providing educational materials that are visually appealing and easy to read. When designing materials, use pictures and examples to illustrate important points, and emphasize the desired behavior rather than medical facts. Choose simple language and avoid complicated medical terminology. Supplement brochures and other written materials with video and audio resources. Above all, remember that educational materials are not a substitute

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for direct client interaction and conversation. Slow down and take time to listen to a client's concerns in a respectful way.

For more information about health literacy or assistance in developing educational programs or materials for low-literacy populations, contact Tara Snyder in the Center for Health Promotion at 410-767-4189.

Potomac Center Hosts Cyclist Team

For the 14th straight year, the Potomac Center hosted the **PUSH America/Journey of Hope Team** on August 14. The team is one of two teams of 30 bicyclists who every year travel across the United States from San Francisco, California to Washington, D. C. to benefit various PUSH America projects and grants.

The Northern Route group of cyclists arrived at Potomac Center in the late afternoon where they enjoyed cold drinks and the use of the Center's shower facilities. A picnic dinner was provided by Potomac Center in the evening for the members and those who live at the Center. Members of the cycling team were able to spend time interacting with residents and support staff.

After a night of rest, the team proceeded on its final leg of the journey to Washington, D. C.



Mike Bilbo (second from left) and Gil Streeks flank Richard Proctor at the ribbon cutting that officially opened the new DHMH Data Center. They were among the many people to assist with the event, which took place during the September 10 technology conference sponsored by the Information Resources Management Administration.



To commemorate the 15th anniversary of the event, there was also a special Journey of Hope Anniversary Team that started in Florence, Oregon and met the Northern and Southern Teams in Washington, D. C. on August 15.

Journey of Hope is a project of PUSH America, a national outreach project of Pi Kappa Phi Fraternity. The organization provides service and education to promote a greater understanding of people with disabilities.

Funds for the PUSH (People Understanding the Severely Handicapped) America organization are made available through the efforts of their undergraduate fraternity members, Pi Kappa Phi alumni, corporate and foundation grants — all in the name of people with disabilities.

Congratulations to . . .

Cora Chua and Patrick Tracy, who are the proud parents of 7.26 pound **Angela Maria**, born on September 8.

Cora is the deputy director of eligibility policy for the Medical Care Programs Office of Operations and Eligibility.

Calendar of Events

Tuesday, October 7 — *workshop*: **Effective Performance Management**; University of Maryland School of Social Work; 8:30 a.m. - 4:15 p.m.; \$120. Approved for Category I continuing education credits. Phone 410-706-1839 for more information.

Tuesday and Wednesday, October 7 - 8 — **Blood Drive**, 9:30 a.m. - 3:00 p.m. O'Connor Building lobby. Call Stephanie Brown at 410-767-6403 for more information or to reserve a time.

Thursday, October 9 — **15th Annual Suicide Prevention Conference**, "*Suicide Prevention in a Time of National Crisis*", Martin's West, 8:00 a.m. - 3:45 p.m. Sponsored by the Governor's Interagency Workgroup on Youth Suicide Prevention. For more information, please contact Henry Westray, Jr. at 410-402-8494.

Thursday, October 9 — *workshop*: **Energizing Your Staff for Improved Performance and Job Satisfaction**; University of Maryland School of Social Work; 8:30 a.m. - 4:15 p.m.; \$120. Approved for Category I continuing education credits. Phone 410-706-1839 for more information.

Thursday and Friday, October 23 - 24 — **Maryland Rural Summit**, Ocean City. Log onto www.fha.state.md.us/opcs/ and click on the 'Rural Health Summit' link for more information.

Thursday, October 23 — *workshop*: **Strategic Management**; University of Maryland School of Social Work; 8:30 a.m. - 4:15 p.m.; \$120. Approved for Category I continuing education credits. Phone 410-706-1839 for more information.

Sunday, October 26 — *fundraising walk*: **Making Strides Against Breast Cancer**, Patterson Park in Baltimore City. Registration 8:00 a.m., walk at 9:00 a.m. Sponsored by the American Cancer Society. Visit www.cancer.org/stridesonline or phone 1-888-535-4555 x 905 for more information.

Tuesday, October 28 — *workshop*: **Identifying and Supervising Domestic Violence Cases**; University of Maryland School of Social Work; 8:30 a.m. - 4:15 p.m.; \$120. Approved for Category I continuing education credits. Phone 410-706-1839 for more information.

Thursday, October 30 — *workshop*: **Creative Approaches to Cognitive Interventions with Older Adults**; University of Maryland School of Social Work; 8:30 a.m. - 4:15 p.m.; \$120. Approved for Category I continuing education credits. Phone 410-706-1839 for more information.

Thursday, October 30 — *workshop*: **Culturally Conscious Counseling Strategies in Mental Health**; University of Maryland School of Social Work; 8:30 a.m. - 4:15 p.m.; \$120. Approved for Category I continuing education credits. Phone 410-706-1839 for information.

AEDs Help Prevent Sudden Cardiac Arrest Deaths

Each year over 3,000 people in the Maryland community experience sudden cardiac arrest. Many of these result in deaths which could be prevented through citizen education and early intervention.

"Partner With Us: Create a Heart Safe Community Month" focuses on motivating members of the community to become an integral part of the Chain of Survival from sudden cardiac arrest by:

- ♥ Knowing the signs of cardiac arrest;
- ♥ Calling 911 for immediate help;
- ♥ Learning CPR;
- ♥ Learning to use an Automated External Defibrillator (AED); and
- ♥ Developing public access defibrillation programs as appropriate.

Michaeline Fedder, Chairman of the Council, notes that the purpose of the campaign is to urge Maryland's citizens to participate in a nationally recognized educational program which teaches recognition of signs of cardiac arrest and action to take including cardio-pulmonary resuscitation (CPR) and use of an AED.

"Early intervention is vital to the survival of a patient suffering from cardiac arrest," said Dr. Robert R. Bass, Executive Director of the Maryland Institute for Emergency Medical Services Systems (MIEMSS). "The use of an AED is critical

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AEDs Help Prevent Sudden Deaths *Continued*

in keeping a patient alive until emergency medical personnel arrive."

AEDs are designed to be used by people without a medical background; however those using the equipment must be trained in the use of the device. Once the AED is hooked up to a patient, it has the ability to determine if defibrillation is necessary or if CPR is appropriate.

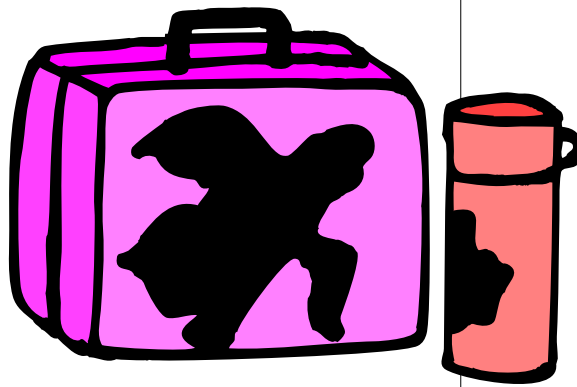
Maryland's layperson AED program, operated by MIEMSS, has approved 295 facilities across the State to use this life-saving equipment. Since use of the equipment began in 2000, eight lives have been saved out of 34 attempts.

Information about high quality citizen training is available on the MIEMSS Web site at www.miemss.org/aed or by calling Lisa Myers at 410-706-4740. Ms. Myers is also available to discuss the use of the AED with any interested organization.

School Lunch Matters

Parents want their children's school to be a safe and healthy place. Tasty, nutritious meals are part of a healthy school environment, whether the food comes from home or is purchased at school.

School lunches are improving, say administrators at the U.S. Department



of Agriculture's National School Lunch Program. But shortened lunch periods, long cafeteria lines and inadequate cafeteria seating keep students from buying nutritious school lunches. Lunches packed at home may not be an improvement over those made at school. Home-packed lunches had more fat than school lunches in a Michigan study, while school lunches were higher in protein, fiber, most vitamins and calcium.

Maryland's Action for Healthy Kids Team is working to improve the health and educational performance of children through better nutrition and physical activity in schools. The Maryland team set three goals - adequate time for students to eat meals at school, nutrition education integrated into the curriculum, and quality daily physical education for all children.

Learn more about the whole nutrition environment in schools, including school lunch and nutrition education, by visiting the following Web sites:

Action for Healthy Kids - Find a Maryland school profile with baseline information about the state's status in key nutrition and physical activity areas,

and information about Maryland's Action for Healthy Kids Team. www.actionforhealthykids.org/ (Choose Maryland from the list of states).

Maryland School Lunch Menus - View menus for school lunches in most Maryland public schools. www.msde.state.md.us/programs/foodandnutrition/

Healthy Schools Summit - Read comments by Nancy Grasmick, Ph.D., State Superintendent of Schools, presented at the Healthy Schools Summit, in October 2002. www.actionforhealthykids.org/docs/speakers/tr_grasmick.pdf



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